

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF DAVID E. MACK	COURT CASE NUMBER 4:11cv344 - 1
DEFENDANT PALISADES COLLECTION, LLC, ET AL	TYPE OF PROCESS summons, order, complaint, and cmp.

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Palisades Collection, LLC
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
210 Sylvan Avenue Englewood Cliffs, NJ 07632

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW David E. Mack 7720 McCallum Blvd #2099 Dallas, TX 75252	Number of process to be served with this Form 285	
	Number of parties to be served in this case	
	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

JDIS ENTRY	
DATE ENTERED:	6/17/11
INITIALS:	mr
DATE CLOSED:	7/6/11 JB
INITIALS:	

Fold

Signature of Attorney other Originator requesting service on behalf of:	<input type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin 78 No.	District to Serve No.	Signature of Authorized USMS Deputy or Clerk mr	Date 6/17/11
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I hereby certify and return that I ☐ have personally served ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above) FILED U.S. DISTRICT COURT EASTERN DISTRICT OF TEXAS	<input checked="" type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above) AUG - 1 2011 DAVID J. MALAND, CLERK BY DEPUTY	Date 6/24/11 Time <input type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee \$ 8	Total Charges \$8.00	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS IFP Order
Sent Cert. mail 7011 0470 0002 7763 1365

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Eastern District of Texas

David E Mack

Plaintiff

v.

PALISADES COLLECTION, LLC

Defendant

Civil Action No. 4:11cv 344

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) PALISADES COLLECTION, LLC
210 Sylvan Avenue
Englewood Cliffs, NJ 07632

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

David E Mack
7720 McCallum Blvd. #2099
Dallas, Texas 75252

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 6/14/11



CLERK OF COURT

David Malone

Signature of Clerk or Deputy Clerk

AO 440 (Rev. 12/09) Summons in a Civil Action (Page 2)

Civil Action No. _____

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* _____

was received by _____

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input type="checkbox"/> I personally delivered this summons.	<ul style="list-style-type: none">Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.Print your name and address on the reverse so that we can return the card to you.Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature X <i>D. Petru</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
<input type="checkbox"/> I left this summons with _____		B. Received by (Printed Name) _____	C. Date of Delivery <i>6/12/11</i>
<input type="checkbox"/> I served this summons on _____	1. Article Addressed to: Palisades Collection, LLC 210 Sylvan Ave Englewood Cliffs, NJ 07632	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
<input type="checkbox"/> I returned this summons to _____	2. Article Number (Transfer from service label) 7011 0470 0002 7763 1365	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
<input type="checkbox"/> Other _____		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

My fees are \$ _____

I declare under penalty of perjury that the foregoing is true and correct.

Date: _____

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Postmark Here	
Seal or Stamp Here	
PS. See Reverse for Instructions	

Additional information regarding this receipt: _____